



CITY OF LEESBURG
HUMAN RESOURCES DEPARTMENT
501 West Meadow Street
PO Box 490630
Leesburg, Florida 34749-0630

Phone: (352) 728-9786 x1200
Fax: (352) 326-6616

www.leesburgflorida.gov

INTERNAL EMPLOYMENT APPLICATION

The City of Leesburg is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability, marital status or any other characteristic protected by law.

The City of Leesburg is a Drug-free Workplace in accordance with Section 440.102, Florida Statutes.

Position Title _____

Name _____
Last First Middle (Maiden)

Email Address _____

Present Address _____
Street City State Zip

Mailing Address _____
(if different) # Street City State Zip

How long have you lived at your present address? _____ Phone (____) _____

Previous Address _____ How long did you live there? _____
City State

Do you have relatives employed by the City of Leesburg? Yes ____ No ____ If yes, give name,
relationship and department where they are currently employed _____

Have you ever pled No Contest to or been convicted of a felony or first degree misdemeanor? _____
If yes, explain fully. Conviction will not necessarily disqualify an applicant from employment, but will be
weighed on its own merit with respect to time, circumstances, seriousness and the position for which you
have applied.

Can you work:
F/T ____ P/T ____ Specify days and hours _____ Can you work:
Shifts? Yes ____ No ____

EDUCATION

SCHOOL	NAME & LOCATION	COURSE OF STUDY	CIRCLE LAST YEAR COMPLETED	DID YOU GRADUATE?	LIST DEGREE OR DIPLOMA (proof may be required)
High	_____		1 2 3 4	Y / N	
College	_____		1 2 3 4	Y / N	
Other	_____		1 2 3 4	Y / N	

CERTIFICATIONS

CERTIFICATION	CERTIFICATION NUMBER	TYPE	EXPIRATION DATE

Do you possess a valid driver's license? Yes _____ No _____ Issued by what state? _____

Class (check one): A ☐ B ☐ C ☐ E ☐ Expiration Date _____

List any endorsements _____

EMPLOYMENT HISTORY

Please list ALL employment and volunteer experience including temporary and part-time. Personnel file will not be reviewed. Account all periods, including unemployment and service in the armed forces. If more than one position was held with the same employer, list information in the next block(s). If you were employed under a different name, please enter that name in the right hand margin. You may attach a resume or additional job history.

CURRENT EMPLOYMENT	DATES OF EMPLOYMENT	DESCRIBE THE WORK YOU DID		
Name <hr/> Address <hr/> (____)_____ Phone with area code	From: To:			

PREVIOUS EMPLOYER OR CITY DEPARTMENT	DATES OF EMPLOYMENT	DESCRIBE THE WORK YOU DID	LAST SALARY	REASON FOR LEAVING
Name <hr/> Address <hr/> (____)_____ Phone with area code	From: To:			

PREVIOUS EMPLOYER OR CITY DEPARTMENT	DATES OF EMPLOYMENT	DESCRIBE THE WORK YOU DID	LAST SALARY	REASON FOR LEAVING
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PREVIOUS EMPLOYER OR CITY DEPARTMENT	DATES OF EMPLOYMENT	DESCRIBE THE WORK YOU DID	LAST SALARY	REASON FOR LEAVING
Name <hr/> Address <hr/> (____)_____ Phone with area code	From: To:			

List the job related skills you possess: _____

PROGRAM	BEGINNER	INTERMEDIATE	ADVANCED
WORD			
EXCEL			
OUTLOOK			
ACCESS			
POWERPOINT			
OTHER			

TYPING SPEED: _____

OTHER PROGRAMS: _____

The facts set forth in this application for employment are true and correct. I understand that if employed, false statements on the application may cause disciplinary action, dismissal or termination.

Applicant's Signature

Date